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APPLICANTS Raymond Clarke, Trappe, MD; Lorri Wilson-Clarke, Trappe, MD;					
** CONTINUING DATA ***** NONE <u>AL</u>					
** FOREIGN APPLICATIONS ***** NONE <u>AL</u>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** <u>AL</u> ** 06/29/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Alma Perini</i> <u>AL</u> Examiner's Signature Initials		STATE OR COUNTRY MD	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
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TITLE Office gym exercise kit					
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		